PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

Blocks I through 5 should be completed where

	correspondence including delow or directed other		ders and notification of m specifying a new corres	ondence address; and/o	or (b) indicating a separa	te "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
66170 AMERICAN E c/o SNELL & W ONE ARIZONA	ILIVIER, L.L.F.		RVICES CO., INGer State addre trans	eby certify that this Fee is Postal Service with su	e of Mailing or Transmi (s) Transmittal is being d fficient postage for first o ISSUE FEE address al (1) 273-2885, on the date	leposited with the United class mail in an envelope rove, or being facsimile	
400 E. VAN BU						(Depositor's name)	
PHOENIX, AZ 85004-2202			F.	ILED VIA EFS WEB		(Signature)	
						· (Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	DRNEY DOCKET NO.	CONFIRMATION NO.	
10/710,308	10/710.308 07/01/2004		David S. Bonalle		7065 5.1400		
TITLE OF INVENTION: METHOD FOR BIOMETRIC SECURITY USING A SMARTCARD							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/26/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
WALSH, DANIEL I 2876			235-380000		·		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor listed, no name will be	te name of a single firm (having as a member a lered attorney or agent) and the names of up to sistered patcht attorneys or agents. If no name is 1, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) AMERICAN EXPRESS TRAVEL RELATED NEW YORK, NEW YORK SERVICES COMPANY, INC. Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov						_	
Please check the appropr	iate assignee category of	categories (will not be p	rinted on the patenty.	maridan 45 corpora	and or dater private Bras	F	
4a. The following fee(s) are submitted: 2 Issue Fee 3 Publication Fee (No small entity discount permitted) 1 Advance Order - # of Copies			 b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-2814 (enclose an extra copy of this form). 				
5. Change in Entity Sta	s SMALL ENTITY stat	us. See 37 CFR 1.27.	☐ b. Applicant is no lon	ger claiming SMALL El	NTITY status. See 37 CFI	R 1.27(g)(2).	
NOTE: The Issue Fee an	d Publication Fee (if requestre of the United Se	prired) will not be accepted	ed from anyone other than t k Office.	he applicant; a registered	l attorney or agent; or the	assignee or other party in	
Authorized Signature		SIL			mber 26, 2007		
Typed or printed name		Sobelman		Registration No			
this form and/or suggest Box 1450, Alexandria, \ Alexandria Virginia 223	d application form to the ions for reducing this by /irginia 22313-1450. Do	e USFIO. Time will valued and the sent to the NOT SEND FEES OR	on is required to obtain or a 1.14. This collection is est y depending upon the indivice Chief Information Office COMPLETED FORMS TO Espond to a collection of inf	or, U.S. Patent and Trade O THIS ADDRESS. SE	emark Office, U.S. Depar ND TO: Commissioner fo	tment of Commerce, P.O. or Patents, P.O. Box 1450,	